

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received:
(For Official Use Only)

FEB 17 1995

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification

B. Subsequent Notification
(Complete Item C)

C. Installation's EPA ID Number

II. Name of Installation (Include company and specific site name)

I N T E R N A T I O N A L M I L L S E R V I C E I N C

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

2 5 H U L L L A N E

Street (Continued)

City or Town

A L T O N

State

Zip Code

I L 6 2 0 0 2 -

County Code

119

County Name

M A D I S O N

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

4 2 0 3 E A R T H C I T Y E X P R E S S W A Y

City or Town

B R I D G E T O N

State

Zip Code

M O 6 3 0 4 4 -

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

(First)

W I N S L E T T

D O N A L D

Job Title

Phone Number (Area Code and Number)

C O N T R A C T O R

3 1 4 - 8 4 5 - 0 7 0 9

VI. Installation Contact Address (See Instructions)

A. Contract Address

Location: Mailing Other

☒ ☒ ☐

B. Street or P.O. Box

4 8 6 2 B A U M G A R T N E R R O A D

City or Town

S T . L O U I S

State

Zip Code

M O 6 3 1 2 9 - 2 8 2 0

VII. Ownership (See Instructions)

A. Name of installation's Legal Owner

I N T E R N A T I O N A L M I L L S E R V I C E I N C

Street, P.O. Box, or Route Number

4 2 0 3 E A R T H C I T Y E X P R E S S W A Y

City or Town

B R I D G E T O N

State

Zip Code

M O 6 3 0 4 4 -

Phone Number (Area Code and Number)

3 1 4 - 3 4 4 - 1 0 9 8

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes

No

(Date Changed)

Month Day Year

MAR 08 1995

RECEIVED

FEB 10 1995

IEPA/DLPC

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to Instructions)

A. Hazardous Waste Activity

B. Used Oil Recycling Activities

1. Generator (See Instructions)
- ☐ a. Greater than 1000kg/mo (2,200 lbs.)
- ☒ b. 100 to 1000 kg/mo (200-2,200 lbs.)
- ☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- ☐ a. For own waste only
- ☐ b. For commercial purposes
- Mode of Transportation
- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify _____
- ☐ 3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity; see Instructions.
4. Hazardous Waste Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Boiler and/or Industrial Furnace
- ☐ 1. Smelter Deferral
- ☐ 2. Small Quantity Exemption
- Indicate Type of Combustion Device(s)
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

1. Used Oil Fuel Marketer
- ☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications
2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)
- ☐ a. Utility Boiler
- ☐ b. Industrial Boiler
- ☐ c. Industrial Furnace
3. Used Oil Transporter - Indicate Type(s) of Activity(ies)
- ☐ a. Transporter
- ☐ b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
- ☐ a. Process
- ☐ b. Re-refine

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒
2. Corrosive (D002) ☐
3. Reactive (D003) ☐
4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s)) ☒
- D 0 0 8

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See Instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See Instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature



Name and Official Title (Type or print)

Donald R. Winslett, Vice-President
for Action Environmental Services, Inc.

Date Signed

2/7/95

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

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Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

FEB 17 1995

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification



B. Subsequent Notification
(Complete Item C)

ILR 000 000 471

II. Name of Installation (Include company and specific site name)

I N T E R N A T I O N A L M I L L S E R V I C E I N C

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

2 5 H U L L L A N E

Street (Continued)

City or Town

State

Zip Code

A L T O N I L 6 2 0 0 2 -

County Code

County Name

119 M A D I S O N

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

4 2 0 3 E A R T H C I T Y E X P R E S S W A Y

City or Town

State

Zip Code

B R I D G E T O N M O 6 3 0 4 4 -

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

(First)

W I N S L E T T D O N A L D

Job Title

Phone Number (Area Code and Number)

C O N T R A C T O R 3 1 4 - 8 4 5 - 0 7 0 9

VI. Installation Contact Address (See Instructions)

A. Contract Address

Location Mailing Other

B. Street or P.O. Box

X X 4 8 6 2 B A U M G A R T N E R R O A D

City or Town

State

Zip Code

S T . L O U I S M O 6 3 1 2 9 - 2 8 2 0

VII. Ownership (See Instructions)

A. Name of installation's Legal Owner

I N T E R N A T I O N A L M I L L S E R V I C E I N C

Street, P.O. Box, or Route Number

4 2 0 3 E A R T H C I T Y E X P R E S S W A Y

City or Town

State

Zip Code

B R I D G E T O N M O 6 3 0 4 4 -

Phone Number (Area Code and Number)

B. Land Type

C. Owner Type

D. Change of Owner Indicator

(Date Changed)

3 1 4 - 3 4 4 - 1 0 9 8 P P Yes No Month Day Year

RECEIVED
FEB 10 1995
IEPA/DLPC

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to Instructions)

A. Hazardous Waste Activity		B. Used Oil Recycling Activities
1. Generator (See Instructions) <input type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.) <input checked="" type="checkbox"/> b. 100 to 1000 kg/mo (200-2,200 lbs.) <input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.)	3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see Instructions. 4. Hazardous Waste Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketers <input type="checkbox"/> c. Boiler and/or Industrial Furnace <input type="checkbox"/> 1. Smelter Deferral <input type="checkbox"/> 2. Small Quantity Exemption Indicate Type of Combustion Device(s) <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 5. Underground Injection Control	1. Used Oil Fuel Marketer <input type="checkbox"/> a. Marketer Directs Shipment of Used Oil to Off-Specification Burner <input type="checkbox"/> b. Marketer Who First Claims the Used Oil Meets the Specifications 2. Used Oil Burner - Indicate Type(s) of Combustion Device(s) <input type="checkbox"/> a. Utility Boiler <input type="checkbox"/> b. Industrial Boiler <input type="checkbox"/> c. Industrial Furnace 3. Used Oil Transporter - Indicate Type(s) of Activity(ies) <input type="checkbox"/> a. Transporter <input type="checkbox"/> b. Transfer Facility 4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies) <input type="checkbox"/> a. Process <input type="checkbox"/> b. Re-refine
2. Transporter (Indicate Mode in boxes 1-5 below) <input type="checkbox"/> a. For own waste only <input type="checkbox"/> b. For commercial purposes		
Mode of Transportation <input type="checkbox"/> 1. Air <input type="checkbox"/> 2. Rail <input type="checkbox"/> 3. Highway <input type="checkbox"/> 4. Water <input type="checkbox"/> 5. Other - specify		

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)	2. Corrosive (D002)	3. Reactive (D003)	4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> D 0 0 8

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See Instructions if you need to list more than 12 waste codes.)


1	2	3	4	5	6

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See Instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature 	Name and Official Title (Type or print) Donald R. Winslett, Vice-President for Action Environmental Services, Inc.	Date Signed 2/7/95
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XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)



UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY

REGION 5
RCRA ACTIVITIES
P.O. BOX A3587
CHICAGO, ILLINOIS 60660

Dear Notifier:

Enclosed you will find the United States Environmental Protection Agency (U.S. EPA) Identification (ID) number that has been assigned to your installation. You will find your twelve character ID number on the top portion of the enclosed notification form. This ID number acknowledges that you have filed a Notification of Regulated Waste Activity for the installation referenced on the notification form to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). This ID number must be included on all shipping manifest(s) for transporting hazardous wastes; on all correspondence; and on all reports required under Subtitle C of RCRA by the U.S. EPA and State agencies.

Please carefully review your status to determine whether the box you have checked is correct for your installation. If you checked Box 1A "Generator" you are a large generator producing over 1000 kg/mo (2200 lbs). Large generators are subject to all applicable regulations under Subtitle C of RCRA including the Annual/Biennial Report. If you determine Box 1A was checked in error, you can change your status to either a Small Quantity Generator (100-1000 kg/mo) or a Conditionally Exempt Generator (less than 100 kg/mo) by notifying the U.S. EPA in writing at the address at the top of this letter. Please indicate which generator category is correct for your installation.

Please note the U.S. EPA number is site-specific. If your installation changes locations, a new notification is required for a new ID number. If your installation has changed ownership, a subsequent notification must be filed to allow the new owner to use the ID number.

If the purpose of your notification is a one-time disposal for a clean-up, PCB removal, underground storage tank removal, etc., please notify U.S. EPA in writing upon completion of the project. U.S. EPA will deactivate the ID number at that time. Any other notification changes not mentioned can be sent to U.S. EPA by letter.

If you have any further questions regarding hazardous waste activity, please contact the Region V Notification Hotline at (312) 886-4001.

Sincerely,

Sharon J. Kiddon
RCRA Notifications Coordinator
Waste Management Division

TO- CAROLIN
LEWIS**EPA****Notification of
Regulated Waste
Activity**Date Received
(For Original Use Only)

93-05-6

ILD 984 917 559

I. Installation's EPA ID Number (Place "T" in the appropriate box)



A. First Notification

B. Subsequent Notification
(Complete Item C)

II. Name of Installation (Include company and specific site name)

ESTATE OF DALE BENNER

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

CHESSEN LANE

Street (Continued)

101-107 CHESSEN LANE

City or Town

EALTON

State

ZIP Code

IL 62664

County Code County Name

IV. Installation Mailing Address (See instructions)

Street or P.O. Box

7811 CARONDELET SUITE 105

City or Town

ST LOUIS

State

ZIP Code

MO 63105

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

ELDER SAM

Job Title

Phone Number (Area code and number)

314-721-2549

VI. Installation Contact Address (See instructions)

A. Contact Address

B. Street or P.O. Box

Location

Mailing

7811 CARONDELET SUITE 105

City or Town

ST LOUIS

State

ZIP Code

MO 63105

VII. Ownership (See instructions)

A. Name of Installation's Legal Owner

DALE BENNER - DECEASED

Street, P.O. Box, or Route Number

CHESSEN LANE

101-107

City or Town

EALTON

State

ZIP Code

IL 62664

Phone Number (Area code and number)

B. Land Type

C. Owner Type

D. Change of Owner

E. Other Change(s)



EPA Form 8700-12 (01-80) Previous edition is obsolete.

CONTINUED ON REVERSE

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only.

2 per document dated 10-10-93. Form 10-21-93
EPA Form 3500-10-21-93

VI. Type of Regulated Waste Activity (Mark "X" in the appropriate boxes. Refer to instructions.)																			
A. Hazardous Waste Activity																			
1. Generator (See instructions) <input type="checkbox"/> a. Greater than 100 kg/mo (2,200 lbs.) <input type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2,200 lbs.) <input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate mode in boxes 1-3 below) <input type="checkbox"/> a. For CMV waste only <input type="checkbox"/> b. For commercial purposes <input type="checkbox"/> c. Mode of Transportation <input type="checkbox"/> 1. Air <input type="checkbox"/> 2. Rail <input checked="" type="checkbox"/> 3. Highway <input type="checkbox"/> 4. Water <input type="checkbox"/> 5. Other - specify _____	<input type="checkbox"/> 3. Transfer, Storage, Shipment (See instructions) (Mark "X" in box if regulated for this activity; see instructions.) 4. Miscellaneous Waste Feed <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketing <input type="checkbox"/> c. Spiller - (Indicate device) - Type of Conversion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 5. Underground Injection Control																		
B. Used Oil Fuel Activity																			
<input type="checkbox"/> 1. Off-Specification Used Oil Fuel <input type="checkbox"/> 2. Generator Marketing to Burner <input type="checkbox"/> 3. Other Marketing <input type="checkbox"/> 4. Burner - (Indicate device) - Type of Combustion Device <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 5. Specification Used Oil Fuel Marketing to Burner (Indicate device) - Type of Combustion Device																			
VII. Description of Regulated Wastes (Use additional sheets if necessary)																			
A. Characteristics of Regulated Hazardous Wastes. Mark "X" in the boxes corresponding to the characteristics of regulated hazardous wastes your installation handles. (See 40 CFR Part 261.20 - 261.27)																			
1. Ignitable (2002) 2. Corrosive (2003) 3. Reactive (2004) 4. Toxicity Characteristic (2005)																			
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																			
(List specific EPA hazardous waste numbers for the Toxicity Characteristic characteristic(s) you)																			
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																			
B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 32. See instructions if you need to use more than 12 waste codes.)																			
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1 D1008	2	3	4	5	6														
7	8	9	10	11	12														
C. Other Wastes. (Flow or other wastes requiring an LD number. See instructions.)																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 16.6%; text-align: center;">1</td> <td style="width: 16.6%; text-align: center;">2</td> <td style="width: 16.6%; text-align: center;">3</td> <td style="width: 16.6%; text-align: center;">4</td> <td style="width: 16.6%; text-align: center;">5</td> <td style="width: 16.6%; text-align: center;">6</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		1	2	3	4	5	6												
1	2	3	4	5	6														
X. Certification																			
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.																			
Signature <i>Samuel P. Etkin</i>	Name and Official Title (Type or print) <i>Samuel P. Etkin / District Manager</i>	Date Signed <i>5/30/93</i>																	
XI. Comments																			
Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section II of the booklet for 1993 rules.)																			

EPA Form 3500-10-21-93 Previous versions are obsolete.

- 9 -



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

77 WEST JACKSON BOULEVARD

CHICAGO, IL 60604-3590

5/10/93

Dear Notifier:

REPLY TO THE ATTENTION OF:

Enclosed you will find the United States Environmental Protection Agency (U.S. EPA) Identification (ID) number that has been assigned to your installation. You will find your twelve character ID number on the top portion of the enclosed notification form. This ID number acknowledges that you have filed a Notification of Regulated Waste Activity for the installation referenced on the notification form to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). This ID number must be included on all shipping manifest(s) for transporting hazardous wastes; on all correspondence; and on all reports required under Subtitle C of RCRA by the U.S. EPA and State agencies.

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If you have any further questions regarding hazardous waste activity, please contact the Region V Notification Hotline at (312) 886-4001.

Sincerely,

A handwritten signature in cursive script that reads "Sharon J. Kiddon".

Sharon J. Kiddon
Environmental Protection Specialist

